Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any.
Attached

PECTION

Permit Number: 091188

	THE TOTAL STATE OF THE PARTY OF	
This is to certify that Pulkkinen Johanna/D	onny Nevers	DEDMIT ICCHED
has permission to Raise roof on part of	structure to create habitable space on the second	PERMIT ISSUED
AT59 BOLTON ST		
	ons, firm or corporation accepting	6 D012001NOV - 9 2009
	s of Maine and of the Ordinances of	
	and use of buildings and structures	
this department.		s, and or the appropriation of the th
Apply to Public Works for street line and grade if nature of work requires such information.	Notification of inspection must be given and written permission procured before this building or part increof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Fire Dept	A STATE OF THE STA	
Appeal Board		1
Other	- XA	onnas h. Marklin 11/9/0
Ospadment Name		Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

EN SUNTE

	Pulkkinen Joh				Phone:
	Location of Construction: Owner Name: 59 BOLTON ST Pulkkinen Johanna		1577 Congress St		207-754-0034
	Contractor Name	*	Contractor Address:		Phone
	Donny Nevers		75 Bishop Street P	ortland	2078788000
Buyer's Name	Phone:		Permit Type: Additions - Dwell	ings	Zone:
:	Proposed Use:		Permit Fee:	Cost of Work: CF	O District:
Family Home	Single Family	Home - Raise roof on	\$420.00	\$40,000.00	3
part of structur			10° A 21 A 21	Approved INSPECTI Use Group	
d Project Description:		-	1		
roof on part of structure	to create habitable spac	ce on the second floor.	Signature:	Signature	In 11/9/09
			PEDESTRIAN ACTIV	TTIES DISTRICT (P.A	.D.)
			Action: Approve	d Approved w/Co	nditions Denied
			Signature	D	ate:
			Zoning .	Approval	
son	10/22/2009				10 . I B
pplicant(s) from meeting		244			Not in District or Landmark
	clude plumbing,	Wetland 14-436	(b) Miscellan	eous	Does Not Require Review
	if work is not started e date of issuance.	□ Flood Zone	Condition	nal Use	Requires Review
	alidate a building	Subdivision Shirt	☐ Interpreta	tion	Approved
		Site Plan	Approved		Approved w/Conditions
DEDMIT ISS	SUED				Denied
PERIVIT 100		Date: 10/29/09 A	Date.	Date	
NOV - 9 20	09				
	his permit application do pplicant(s) from meeting ederal Rules. uilding permits do not in optic or electrical work. uilding permits are void ithin six (6) months of the alse information may invermit and stop all work.	Family Home Single Family part of structure space on the set of t	Single Family Home - Raise roof on part of structure to create habitable space on the second floor. Taken By: Son Date Applied For: 10/22/2009 his permit application does not preclude the pplicant(s) from meeting applicable State and ederal Rules. uilding permits do not include plumbing, eptic or electrical work. uilding permits are void if work is not started ithin six (6) months of the date of issuance. alse information may invalidate a building ermit and stop all work DERMIT ISSUED Single Family Home - Raise roof on part of structure to create habitable space on the second floor. Special Zone or Review - Shoreland Wetland Wetland Subdivision Mai Minor MM Or wit could be part of structure to create habitable space on the second floor.	Proposed Use: Family Home Single Family Home - Raise roof on part of structure to create habitable space on the second floor. Approve Signature: PEDESTRIAN ACTIV Action: Approve Action: Approve Signature: PEDESTRIAN ACTIV Action: Approve Signature: Flood Zone Applied For: Shoreland Wetland	Proposed Use: Single Family Home

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work

Order Release" will be incurred if the procedure is not follo	The second secon
A Pre-construction Meeting will take place upon receipt of	your building permit.
X Framing/Rough Plumbing/Electrical: Prior to Ar	y Insulating or drywalling
X Final inspection required at completion of work.	
Certificate of Occupancy is not required for certain projects. Y your project requires a Certificate of Occupancy. All projects I	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
If any of the inspections do not occur, the project cannot go REGARDLESS OF THE NOTICE OR CIRCUMSTANCE	· · · · · · · · · · · · · · · · · · ·
CERIFICATE OF OCCUPANICES MUST BE ISSUED A THE SPACE MAY BE OCCUPIED.	ND PAID FOR, BEFORE
X Day Me	11/9/09
Signature of Applicant/Designee Thomas M. Markley	11/09/09
Signature of Inspections Official	Date

Building Permit #: 09-1188

CBL: 186 D012001

	- Building or Use Permit	Permit No: 09-1188	Date Applied For: 10/22/2009	CBL:
The Carry of the C	Tel: (207) 874-8703, Fax: (207)	0 8 / 4 - 8 / 16	10/22/2009	186 D012001
Location of Construction:	Owner Name:	Owner Address:		Phone:
59 BOLTON ST	Pulkkinen Johanna	1577 Congress St		207-754-0034
Business Name:	Contractor Name:	Contractor Address:		Phone
Donny Nevers 75 Bishop Street Portland (20				(207) 878-8000
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellin	nore.	
111			igs	
Proposed Use:	oof on part of structure to create	Proposed Project Description: Raise roof on part of struct		
habitable space on the second		second floor.		
The revised permit is	vas to raise the roof over part of the b to keep the roof as a hip roof becaus (b), 50% of first floor footprint is 129 rease.	e of section 14-436(b).	•	OK IS ISSUED
 This property shall remain approval. 	a single family dwelling. Any chang	ge of use shall require a separate	permit application	for review and
This permit is being appro- work.	ved on the basis of plans submitted.	Any deviations shall require a	separate approval t	pefore starting that
Dept: Building Sta	atus: Approved with Conditions	Reviewer: Tom Markley	Approval 0	Pate: 11/09/2009
Note:				Ok to Issue; 🗵
Hardwired interconnected level.	battery backup smoke detectors shall	If be installed in all bedrooms, p	rotecting the hedro	noms, and on every
2) The design load spec shee	ts for any engineered beam(s) / Truss	ses must be submitted to this of	fice.	
	red for any electrical, plumbing, spri pproval as a part of this process.	nkler, fire alarm or HVAC or ea	xhaust systems. Sep	parate plans may

Comments:

and approrval prior to work.

10/28/2009-amachado: Left vem for Donny Nevers, contractor. Structure doesn't meet the rear setback of 18'. Using sectin 14-436(b) the extra living space must be created by raising the existing roof configuration. What is being proposed is not keeping the existing rof configuration.

4) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review

10/29/2009-amachado: Donny Nevers brought in revised plan to change the gable roof to a hip roof.

General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 1	Location/Address of Construction: 5	9 BOLTON ST PORTL	AND ME
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# Applicant must be owner, Lessee or Buyer! Felephone: Name DONNY NEVERS 978 8000 Address 75 BISHOP ST EXT 222 City, State & Zip POPTLAND ME Lessee/DBA (If Applicable) Cowner (if different from Applicant) Name JOHDNA PULKKINGN Address 20 WEST ST #9 Cof O Fee: \$ City, State & Zip PORTVANO ME Total Fee: \$ 49,000 Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: MAKE EXSISTING FINISHED BEORSM LANGER Is property part of a subdivision? NO If yes, please name Project description: SEE PROPOSED USE T Charise HIP roof to Full Contractor's name: DONNY NEVERS Address: 75 BISHOP ST City, State & Zip PORTVAND ME Telephone: 878 8000 Telephone: Box Of Residential Units III with 5/12 Gast (a Yoff) Contractor's name: DONNY NEVERS Address: 75 BISHOP ST City, State & Zip PORTVAND ME O4103 Telephone: 878 8000	Total Square Pootage of Proposed Structur	re/Area Square Footage of Lot	Number of Stories
Name JOHDNNA PULKKINEN Address 20 WEST ST #9 Cof O Fee: \$ City, State & Zip PORTVAND ME Total Fee: \$ 49,000 10 Total Hade Current legal use (i.e. single family) SINGLE FAMILY Number of Residential Units If vacant, what was the previous use? Proposed Specific use: MAKE EXSISTING FINISHED BEORSM LANGER Is property part of a subdivision? NO If yes, please name Project description: SEE Proposed USE T Change Hip roof to Full Contractor's name: DONNY NEVERS Address: 75 BISHOP ST City, State & Zip PORT CAND ME 04103 Telephone: 878 8000	Tax Assessor's Chart, Block & Lot	Name DONAY NEVERS Address 75 BISHOPST	878 8000 EXT 222
Current legal use (i.e. single family) If vacant, what was the previous use? Proposed Specific use: MAKE EXSISTING FINISHED BEORSM LARGER Is property part of a subdivision? NO If yes, please name Project description: SEEPROPOSED USE T Change HIP roof to Full Contractor's name: DONNY NEVERS Address: 75 BISHOP ST City, State & Zip PORT CAIND ME 04103 Telephone: \$378,8000	Lessee/DBA (If Applicable)	Name JOHANNA PULKKINEN Address 20 WEST ST #9 City, State & Zip DASS	Work: \$ 40,000 C of O Fee: \$
Address: 75 BISHOP ST City, State & Zip PORT CAIND, ME 04103 Telephone 878 8000	Proposed Specific use: WAKE Is property part of a subdivision? NO Project description: SEEPROPO.	SAME SAME SAME SEXSIFFING FINISHED BED If yes, please name SED USE T Change H	OREM LARGER 17P roof to Full
City, State & Zip PORT CAIND, ME 04103 Telephone: 878 8000	Address: 75 B15H0P	57	
Who should we contact when the permit is ready: DONNY NEVERS Telephone: 150222 Mailing address:SAME	Who should we contact when the permit is	ME 04103 ready: DONNY NEVERS	Telephone: 1578 8000

In order to be sure the City fully understands the full scope of the project, the Planning and **Office 2009** epartment may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on line at www.portlandmaine.com er stor by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

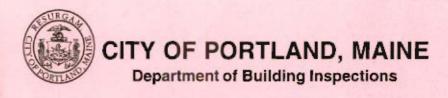
α			5
Signature: Thank turkener	Date:	1012109	

PLUMBING APPLICAT	ION	874-870	3	Department of Health and Human Services Division of Environmental Health	
PROPERTY ADDRESS				Straight in Children manner (1987)	
Town or Prantation Post leas &			200	9-8255	
Street Subdivision Lor # 59 Bolton St			TANT # 11132 TOWN CORY		
PROPERTY OWNERS NAME		BORTLAND Pormit /2 1/2	199	S FEE Charged	
Last Pulickinen First Joha	nna	Logar Plumbing Inspe	otor Signature	L.P.L.# / 10, C, /	
		(-		
Mailing Address of Owner/Applicant (If Different)	Ame # 2		186-	D12	
Owner/Applicant Statemen				ction Required	
spewhyage and understand that any taisification is rea Plug infig inspectors to deny a Permit	Section Section 11 Section 1	compliance with the	a Maine Plumbin	g Rules	
	12409				
Signature of Owner-Applicant	Date	Local Plumbing I	nspector Signatu	Date Approved	
	PER MIT	INFORMATIO			
This Application is for Ty	pe of Structure 1	To Be Served:	Plu	mbing To Be Installed By:	
	FAMILY DWELLI	William Control		TER PLUMBER	
LIMBING	ODULAR OR MO		OIL BURNERMAN MFG'D. HOUSING DEALER/MECHANIC		
3I MULTIP	LE FAMILY DWEL	SLLING 3. MFG'D. HOUSING DEALER/MED 4. PUBLIC UTILITY EMPLOYEE			
4. □ OTHER	- SPECIFY		5 PRC	PERTY OWNER	
	W		LICENS	E# 16618	
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column1 Type of Fixture	
ADOK UP, to public sewer in	Hos	ebib / Sillopok)	Bathtub (and Shower)	
not regulated and inspected by the local Sanitary District.	Floo	PECE	1	Shower (Separate)	
OR	Urin	DEC - 4 2009	words/	Sink	
HOOK-UP; to an existing subsurface	Drin	king Fountain	laine	Wash Basin	
wastewater disposal system.	Indi	iking Fountain Treatment Softener Eller etc.	/	Water Closet (Toilet)	
PIPING RELOCATION: of sanitary ines, drains, and piping without new fixtures.	Water Treatment Softener, Filter, etc.			Clothes Washer	
	Grease / Oil Separator			Dish Washer	
	Roc	of Drain		Garbage Disposal	
OR	Bide	et .		Laundry Tub	
TRANSFER FEE	Oth	er:		Water Heater	
[\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
				Fixtures (Subtotal) Column 2	
SEE PERMIT FEE SCHEDULE				Total Fixtures	
FOR CA	E 0 0		Fixture Fee		
_	1.		Transfer Fee		
				Hook-Up & Relocation Fee	

Page 1 ol 1 HHE-211 Rev 06-05

STATE COPY

Permit Fee (Total)



Original Receipt

		10	0.02	20 3 9
Received from		Dunny	Lever	5.
Location of Work	Vac II	59 Bo	Han	
Cost of Construction	\$	Bui	Iding Fee:	
Permit Fee	\$		Site Fee:	
	Cert	tificate of Occupar	ncy Fee:	100
			Total:	120
Building (III) Plu Other CBL: 186	0.12	_		
Check #:	_	Total Co	llected s	420
		started unti		

Taken by:

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy